

Employee Name: _____

Job Title: _____

Record of Employee Hazardous Waste Management Training

Minnesota Rule 7045.0292, subpt. 5.H. (3) requires that Small Quantity Generators ensure and document that all employees are thoroughly familiar with proper waste handling and emergency procedures relevant to their responsibilities during normal facility operations and emergencies. Hibbing Community College is a Very Small Quantity Generator (VSQG). VSQG's are not required to conduct annual training but it is recommended by the Minnesota Pollution Control Agency (MPCA). Hibbing Community College will continue to provide initial training for its affected employees.

Summary of Hazardous Waste Training

Date of Training: _____ Type of Training: Introductory Refresher

Instructors Name: _____ Self Delivered _____

Check areas covered during hazardous waste training

License Requirements		Manifests		Emergency Response	
<input checked="" type="checkbox"/>	Management plans	<input checked="" type="checkbox"/>	Proper completion	<input checked="" type="checkbox"/>	Emergency equipment
<input checked="" type="checkbox"/>	License posted		Copy distribution		Use of equipment
Accumulation of Wastes		<input checked="" type="checkbox"/>	Land disposal restriction notices	<input checked="" type="checkbox"/>	Location of equipment
<input checked="" type="checkbox"/>	Hazards of each waste	Record Keeping			Maintenance of equipment
	Storage time limits		Container/tank inspections	<input checked="" type="checkbox"/>	Telephone postings
	Satellite accumulation	<input checked="" type="checkbox"/>	Personal training	<input checked="" type="checkbox"/>	Response to spills
Containers		<input checked="" type="checkbox"/>	Manifests & shipping papers	<input checked="" type="checkbox"/>	Response to fires
<input checked="" type="checkbox"/>	Marking and labeling		Annual reports		Response to explosives
<input checked="" type="checkbox"/>	Keeping containers closed	Waste Reduction		<input checked="" type="checkbox"/>	Local authority arrangements
	Weekly inspections	<input checked="" type="checkbox"/>	Reduce, reuse, recycle	<input checked="" type="checkbox"/>	Evacuation routes
	Aisle space	Other (Specify)			
	Outdoor storage				
	Indoor storage				
Tanks					
<input checked="" type="checkbox"/>	Labeling				
	Inspections				

Certification: I received hazardous waste training in the areas checked above.

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____